



Section Final Round Qualifiers

➔ All participants who have qualified for the final round of the Section Tournament must complete this form and return to the Room Manager prior to the start of the final round.

➔ *****PLEASE MAKE CERTAIN ALL NAMES ARE SPELLED CORRECTLY.*****
This information will be used for the program and will be released to the news media.

Place		
1st place	2nd place	3rd place

Class	Section

Event: (Check)

<input type="checkbox"/> Creative Expression <input type="checkbox"/> Discussion <input type="checkbox"/> Duo Interpretation <input type="checkbox"/> Extemporaneous Reading <input type="checkbox"/> Extemporaneous Speaking	<input type="checkbox"/> Great Speeches <input type="checkbox"/> Humorous Interpretation <input type="checkbox"/> Informative Speaking <input type="checkbox"/> Original Oratory <input type="checkbox"/> Serious Interpretation-Drama	<input type="checkbox"/> Serious Interpretation-Poetry <input type="checkbox"/> Serious Interpretation-Prose <input type="checkbox"/> Storytelling
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Name of Student: _____

Title of Selection: _____

Author (where applicable): _____

School: _____

Year in school: _____

Remember, scripts must be submitted at each level of competition—this includes the State Contest. At the State Contest, scripts must be submitted at registration, except the Draw Events and Discussion. Select one below:

SOURCE _____

A copy of the selection, as copied from the original.